From: "Thomson, Deborah (Feinstein)" <Deborah_Thomson@feinstein.senate.gov>
To: Jonna Mazet <jkmazet@ucdavis.edu>
Cc: "Fuentes, Andrew (Feinstein)" <Andrew_Fuentes@feinstein.senate.gov>, "Gobbi, Serena (Feinstein)"
<Serena_Gobbi@feinstein.senate.gov>
Subject: RE: Quick question for you that is *time sensitive*
Sent: Wed, 22 Jan 2020 22:44:44 +0000

Great, thanks for this!
Deb

From: Jonna Mazet <jkmazet@ucdavis.edu>
Sent: Wednesday, January 22, 2020 5:42 PM
To: Thomson, Deborah (Feinstein) <Deborah_Thomson@feinstein.senate.gov>
Cc: Fuentes, Andrew (Feinstein) <Andrew_Fuentes@feinstein.senate.gov>; Gobbi, Serena (Feinstein)
<Serena_Gobbi@feinstein.senate.gov>
Subject: Re: Quick question for you that is *time sensitive*

I don't think we know if they used our protocols or when in China. All very closed lipped until recently. Definitely same team as Predict working on the viral detection there, and Predict protocols have been being used for screening in other countries. We do know a viral specific test is now in use, which will always be better once the detection and discovery has allowed for that. That is what will be used most often going forward, which is good.

On Wed, Jan 22, 2020 at 2:16 PM Thomson, Deborah (Feinstein) <Deborah_Thomson@feinstein.senate.gov> wrote:
Greatly appreciate this information and the attachment!

I want to make sure I am interpreting this right- I remember several weeks ago that the Wuhan virus was first detected using one particular test and 41 people were considered infected. Within 48 hours, there seemed to be another type of test (a better test) for these people and it appeared that 39 were actually infected. Did PREDICT have a hand in the development of this second test?

Deb

From: Jonna Mazet <jkmazet@ucdavis.edu>
Sent: Wednesday, January 22, 2020 5:10 PM
To: Thomson, Deborah (Feinstein) <Deborah_Thomson@feinstein.senate.gov>
Cc: Fuentes, Andrew (Feinstein) <Andrew_Fuentes@feinstein.senate.gov>; Gobbi, Serena (Feinstein)
<Serena_Gobbi@feinstein.senate.gov>
Subject: Re: Quick question for you that is *time sensitive*

Thanks -- messages just crossed in space, so I'll paste my other email here as well. I think the other one probably came with an externally-strange Subject line.
Appreciate all of your efforts,
Jonna

Hi Deb & Andrew (& now Serena),
Below was drafted quickly in response to questions re our work related to the Wuhan nCoV. There was specific discussion related to a paper on China efforts that recently came out of our team, so that is also attached for your reference. The first point is about a figure in that paper.

Re. Fig. 2 in the attached paper: The graph shows which behaviors are most correlated with self-reported illnesses that are similar to SARS (SARI) and flu (ILI). Every point to the Right of the vertical dotted line in the middle is a positively correlated with illness (i.e. could be a cause) and everything to the left is negatively correlated (i.e. unlikely to be a cause or even could be protective). Take home message is that hunting, butchering, eating wildlife correlates with illness, as does exposure to bats, and being from poor, rural communities. This is exactly the scenario we saw in the samples we tested from Yunnan Province, of people highly exposed to wildlife, that had ~3% seroprevalence against bat SARS-related CoVs (very close to the Wuhan CoV) about 2 years ago.

Re how our work from PREDICT has helped the Wuhan nCoV2019 outbreak:

- PREDICT funds were used to develop capacity at the Wuhan Institute of Virology (WIV) in the form of training, protocols, funding for equipment, and by enhancing international collaboration with key scientists there and the greater Predict community (e.g. Zhengli's collaboration with Supaporn in Thailand).
- The PREDICT country coordinator for China, Zhengli Shi, is working on the Wuhan nCoV. Our collaboration with Zhengli during the 10 years of Predict, and with supplemental funding from NIH, gave us critical data on the group of CoVs that Wuhan nCoV belongs to. We sampled >10,000 bats and ~2,000 other mammals, using Predict protocol Coronaviridae family-level PCR to discover 52 novel SARSr-CoVs, including the closest relative of the Wuhan nCoV – rp3-CoV (and 92-94% similar at RdRp). We showed that some of these viruses can bind to human cells, and cause SARS-like disease in humanized mouse models that was not always treatable with the monoclonals under development against SARS-CoV – i.e. they are a high risk group. <u>You could say that PREDICT helped raise the flag that these viruses have pandemic potential.</u>
- We also showed the serological evidence that people living at the wildlife-human interface in rural China are being exposed to these SARS-related coronaviruses – marking them as a 'clear and present danger'. We also showed the behavioral risk evidence in the paper attached.
- At a larger scale, PREDICT project findings demonstrate the importance of multi-sectoral or One Health collaborations in emerging infectious disease control and prevention, especially to address the repeatedly demonstrated risks from human – animal behavioral interactions. This has clearly been taken on board by the Chinese authorities investigating Wuhan nCoV, which include our collaborators.

Hope this info helps, and let me if there's anything else you need or if you want to be connected with more of the team. The discovery and rapid spread of this new coronavirus certainly speaks to the need to continue to sample and test more extensively throughout the world in order to get the viral threats identified and characterized in advance of outbreaks to aid response and rank risk to prioritize resource allocations appropriately.

Thanks for all that you do,
Jonna

Note that content above was drafted by Peter Daszak of EcoHealth Alliance (EHA), as EHA is the lead partner within Predict for China activity management.

Jonna AK Mazet, DVM, MPVM, PhD
Professor of Epidemiology & Disease Ecology
Executive Director, One Health Institute
Director, One Health Workforce – Next Generation of USAID Emerging Threats Division
Director Emeritus, PREDICT Project of USAID Emerging Threats Division

School of Veterinary Medicine
University of California, Davis
onehealthinstitute.net

Institute for Global Health Sciences
University of California, San Francisco
https://globalhealthsciences.ucsf.edu/

For scheduling and logistical issues, please contact:
Ms. Mary Radford
maradford@ucdavis.edu
+1-530-752-3630
Attachments area

On Wed, Jan 22, 2020 at 1:57 PM Thomson, Deborah (Feinstein) <Deborah_Thomson@feinstein.senate.gov> wrote:
Hi Jonna,

Thank you for the phone call. I've cc'ed both Andrew and Serena (the public health/global health team) so that you have their contacts as well.

Deb

From: Jonna Mazet <jkmazet@ucdavis.edu>
Sent: Wednesday, January 22, 2020 4:42 PM
To: Thomson, Deborah (Feinstein) <Deborah_Thomson@feinstein.senate.gov>
Subject: Re: Quick question for you that is *time sensitive*

Hi Deb,

Please call when you are available. I've had some time this afternoon free up.

Talk soon,

Jonna

On Wed, Jan 22, 2020 at 1:41 PM Thomson, Deborah (Feinstein) <Deborah_Thomson@feinstein.senate.gov> wrote:

Hi Jonna,

We have a quick question for you. Can I call you? If so, what is your number? I wanted to introduce you to Andrew (my colleague who is head of the public health portfolio) anyway so this could take care of two things at once.

Deborah Thomson, DVM
AVMA/AAAS Congressional Fellow
Office of U.S. Senator Dianne Feinstein
202-224-1546

Website | **Twitter** | **Facebook** | **YouTube**